



Calgary Nepalese Community Association (CNCA)
 Calgary, Alberta
 Est. 1985
 E-mail: calgarynepalese@gmail.com; mail@calgarynepalese.ca
 Web Address: <http://www.calgarynepalese.ca/>

LIFE MEMBERSHIP FORM

Life Membership Plan: Individual (\$150.00) Family (\$250.00)

(Family fee for life membership covers unmarried children over 18 years of age as well. Please submit the membership form and required fees to one of the current year CNCA executive board members. Checks are payable to "Calgary Nepalese Community Association". To contact CNCA officials, either e-mail OR send mail to the current address OR phone the current officials of CNCA found in the web site).

	<u>Title:</u>	<u>First Name & Initial:</u>	<u>Surname:</u>
<u>Yourself:</u>	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>	_____	_____
<u>Spouse:</u>	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>	_____	_____
<u>Unmarried Children (over 18 years of age):</u>			
(1)	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>	_____	_____
(2)	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/>	_____	_____

Children Information (Under 18 years):

S.N.	Name	Gender	Birth Year	Sports or Other Interests

Current Residence Address:

----- Postal Code: -----

Telephone: (Home): ----- (Work): ----- (Cell): -----

E-Mail: (1st) ----- (2nd) -----

Signature (Yourself): ----- **Date:** -----(yy)/-----(mm)/-----(dd)

Signature (Spouse): ----- **Date:** -----(yy)/-----(mm)/-----(dd)

Do not write below this line (For CNCA office use only)

Membership Form & Fee Collected by: ----- **Position:** -----

Amount collected: ----- **Payment Method:** ----- **Date:** -----